



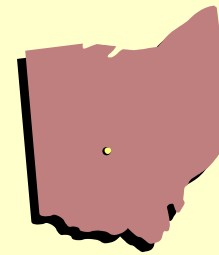
Health Information Exchange Strategic and Operational Plan Profile

Overview

Ohio is the country's 7th most populous state with nearly 11.5 million residents. Its geographic position links the Northeast with the Midwest and is within a one-day drive of 50% of the US population and 70% of the country's manufacturing capacity. Fifty-seven (57) of Ohio's 88 counties are formally designated as rural, Appalachian or underserved. Ohio has chosen to focus their REC and HIE efforts on this portion of the state, as it constitutes their most significant gap in capacity. Additionally, almost no HIE activity between unaffiliated organizations is occurring in Ohio outside what is supported by HealthBridge in the greater Cincinnati area. To meet the tremendous needs of as many providers as possible across the state, Ohio will begin with a simple Direct Project secure messaging strategy that includes core services, and will build to more complex HIE capacity over time. The state has designated the non-profit organization, Ohio Health Information Partnership (OHIP), to receive the State HIE Cooperative Agreement supporting this work and to oversee implementation of the State Plan. OHIP also serves as the REC for the majority of the state.

Model and Services

In the first phase, OHIP will work with their stakeholders to develop an authoritative provider directory and HISP services to support secure messaging using Direct Project protocols. OHIP will leverage information obtained through multiple databases, including information from REC recruitment, state medical associations and state licensing boards to develop the provider directory. This directory will be the authoritative provider directory for Ohio and all providers, hospitals, and labs within the state will have the opportunity to utilize it at no charge. Because OHIP is also the REC for most of Ohio, they are uniquely positioned to leverage their REC outreach efforts with providers and EHR vendors across the state. OHIP has developed a regional partner network that covers the state, including coordination with HealthBridge, the REC responsible for the greater Cincinnati area. OHIP will use this infrastructure to effectively reach providers with technical assistance and information about the core services developed to support their Phase I strategy. OHIP will apply lessons learned from their Phase I efforts to expand the provider directory to an authoritative, statewide master entity directory, develop a master patient index, record locator service, and enhanced public health connectivity that would support longitudinal record exchange in the future. As they embark on their HIE service development, they will also explore potential convergence of clinical and administrative exchange processes.



State: Ohio

Interim HIT Coordinator:
Bob Campbell

State Designated Entity:
Ohio Health Information
Partnership (OHIP)

Award Amount:
\$14,872,199

Contact:
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Website:
<http://www.ohiponline.org>

Other Related ONC funding in Ohio:

Ohio Health Information Partnership
Regional Extension Center \$28,500,000

HealthBridge Inc. Regional Extension
Center (for select areas in Ohio, Indiana
& Kentucky) \$9,738,000

Greater Cincinnati Beacon Community
\$13,775,630



Highlights

- ***Commitment to Focus on Neediest Geography of State.*** OHIP has committed to devoting primary attention to the greatest HIE gap within their state – their Appalachian and other rural communities. In concert with a clear REC focus on these communities, OHIP stands to help these communities make significant improvements in the tools and organizations providing care to the state’s neediest residents. Without OHIP’s dedication to these communities, their providers may not be able to achieve meaningful use of HIT.
- ***Beacon Award.*** OHIP has an opportunity to learn from and develop HIE services that complement the work of the Greater Cincinnati Beacon Community.
- ***Open Provider Directory.*** To fully enable a statewide HIE, OHIP will develop a broadly available provider directory that can serve multiple known and emerging needs. OHIP’s directories will contain a broad complement of information for health care providers ranging from physicians to long term care providers and labs.



Meaningful Use

	<u>Landscape</u>	<u>Strategy</u>
<u>E-Prescribing</u>	<ul style="list-style-type: none"> 1.3% (or 30 total) community pharmacies do not accept electronic prescriptions (primarily independent pharmacies and small pharmacy chains) Due to stringent regulation by the state's board of pharmacy, many providers that have eRx capabilities, have not turned this functionality on in their systems or simply do not use it. 	<ul style="list-style-type: none"> OHIP will work with their regional partners and eRx Task Force to conduct targeted outreach and education to these 30 pharmacies. They will identify why the pharmacies are not currently accepting electronic prescriptions and work with them to resolve their issues. OHIP will track the ongoing success of their eRx adoption. OHIP will work with their REC side and their eRx Task Force, which includes the State's Board of Pharmacy, to increase provider adoption of certified EHRs with eRx capability and ensure adoption and use that is consistent with the state's board of pharmacy requirements. They will also work to help providers that have not turned on this functionality, to enable and use it in a certified manner.
<u>Structured Lab Results</u>	<ul style="list-style-type: none"> Although 90% of clinical labs in Ohio can currently support electronic exchange of lab results, the majority of results are still delivered in a manner which is not fully integrated with the physicians' EHR system <ul style="list-style-type: none"> Majority of gap area is served by 69 hospital-based laboratories inside Critical Access Hospitals or other rural or underserved community hospitals (constitutes ~30% of total lab volume in the state) 	<ul style="list-style-type: none"> OHIP will promote their open provider directory and HISP services among all labs in the state to enable use of Direct protocols for delivery of structured lab results. OHIP will focus their intensive efforts on the 69 hospital-based labs within their priority gap area. They will use the results of their REC's intensive laboratory systems analysis within these hospitals (funded through an REC CAH supplemental grant program) to create and offer the most appropriate translation and routing services possible for these hospitals. OHIP will work with the Ohio Dept of Health (ODH) to facilitate delivery of reportable electronic lab results to ODH. OHIP will also provide education and communication to laboratory directors regarding CLIA/CAP requirements for validating clinical laboratory results exchanged electronically.
<u>Patient Care Summary</u>	<ul style="list-style-type: none"> Some exchange among unaffiliated organizations is occurring via HealthBridge in the greater Cincinnati area and within IDNs, but no other care summary exchange across unaffiliated organizations is currently occurring in the state. 	<ul style="list-style-type: none"> OHIP will encourage the use of the Direct Project protocols among providers and EHR vendors across the state for secure messaging that supports patient care summary exchange; however, they will focus first on their priority gap area. OHIP will offer the tools to support Direct for free, but will charge a minimal subscription fee if providers choose to have OHIP manage patient consent.



HIE Inventory

Standards		Quality Improvement	
Nationwide Health Information Network Exchange Specifications	X	Care Coordination	X
Nationwide Health Information Network CONNECT	X	Quality Reporting	X
Nationwide Health Information Network DIRECT	X	Behavioral Health Information Exchange	X
Plans to exchange with federal agencies or other states via Nationwide Health Information specifications	X	Lab Strategy	
Public Health		Translation services	X
Electronic lab reporting of notifiable conditions	X	EHR interface	X
Syndromic surveillance	X	Policy strategy	
Immunization data to an immunization registry	X	Order Compendium	
Patient Engagement		Bi-Directional	X
Patient Access/PHR	X	Alignment with CLIA	X
Blue Button		E-Prescribing	
Patient Outreach	X	Medication History	X
Privacy and Security		Incentive or grants to independents	
Privacy and Security Framework based on FIPS	X	Plan for controlled substance	
Individual choice (Opt In/Opt Out/hybrid)	Hybrid	Set goal for 100% participation	X
Authentication Services	X	Controlled substance strategy	
Audit Log	X	Care Summaries	
Administrative Simplification		Translation services	X
Electronic eligibility verification	X	CCD/CCR Repository	
Electronic claims transactions	X	Directories	
Vendor		Provider Directory	X
Planning	X	Master Patient Index	X
Core Services	X	Record Locator Services	X
		Health Plan Directory	X
		Directory of licensed clinical laboratories	X

Information for this profile was obtained from the approved Operational and Strategic Plan submitted to the National Coordinator for Health Information Technology as a condition of the Health Information Exchange Cooperative Agreement. The complete plan can be downloaded at: www.statehieresources.org

